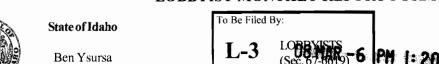
## LOBBYIST MONTHLY REPORT FORM



 $Page\_\_of\_\_Page(s)$ 



Secretary of State

Phone: (208) 334-2852 Fax: (208) 334-2282

THIS SPACE FOR OFFICE USE ONLY

			ly in black ink) bottom of page								
Lobbyist's name and permanent business address							repared	Period	Period covered		
11303	ew Johnso 3 North 118	March 3, 2008			✓ month ending						
Scotts	sdale, Arizo		ĺ				(Mo.	(Mo.) (Day) (Yr.)			
									02	29	2008
Item 1	Totals	of all reportab	ole expenditures made of								loyer.
Category of Expenditure Reinbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported		*Total Amount for All Employers	Proportionate amount		nts contributed by each employer (Identify employers, under f page.)						
			Employ	er No. 1	Employer No. 2		Employer No. 3		Employer No. 4		
Enterta Food a	inment nd Refreshme	ent	\$0.00	\$	0.00	\$		s		s	
Living	Accommodat	ions	0.00		0.00	) _			<u></u>		
Advert	ising		0.00		0.0	) _					
Travel			0.00		0.00	) _					
Teleph	one		0.00		0.00	) _					
Other Expenses or Services			0.00		0.00	) _					
		_								_	
		Total	\$0.00	s	0.00	\$		<b>s</b>		s	
*When	the number o	f employers vo	u are reporting for require	' es multiple L	2 forms to	be f	iled a total amoun	t for all e	mployers shou	ld be entere	ed on Page 1.
Item			ture of more than fifty do				other holder of pu	blic offic	e, and executi	ve officials	
	Date Place				Amount Names of Legislators, Public and Executive Official					ls in Group	
N/A	l										
	Continued on	attached page(s)									
INSTRUCTIONS  Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code						tem 3 Employer(s) Name(s) and Address(es)					
						Takeda Pharmaceuticals America					
						No. I One Takeda Parkway Deerfield, Illinois 60015					
Filing deadline: Monthly reports due within ten (10) days month for activities of the past month.					the No.	No. 2					
TO BE FILED WITH:											
Ben Ysursa						3					
Secretary of State PO Box 83720											
Boise. ID 83720-0080											

Item 4			lator, Public or Executive O	by the lobbyist's employer in the nature of contributions of money or other tangible or inta- blic or Executive Official or for or on behalf of any Legislator, Public or Executive Official.							
	Date	Amount	Nar	Name of Legislator, Public or Executive Official Receiving or Benefiting							
Item 5 Subject (from N/A	Subject ma or House E the Lobbyi	tter of proposed legisla	tion, the number of the Senate r legislative activity in which pposing.  Appropriation Bill Number	Codd 01 02 03 04	LEGISLATIVE SUE  e Subject Agriculture, horticulture, farning, and livestock Amusements, games, athletics and sports Banking, finance, credit and investments Children, minors, youth, senior citizens	IDENTIFICATION  Subject Health service, medicine, drugs and controlled substances, health insurance, hospitals Higher education Housing, construction, codes Insurance (excluding health insurance) Labor, salaries and wages,					
				05 06 07 08 09 10 11 12 13 14 15 16	minority affairs Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds	22 23 24 25 26 27 28 29 30	collective bargaining Law enforcement, courts, judges, crimes, prisons License, permits Liquor Manufacturing, distribution and services Natural resources, forest and forest products, fisheries, mining and mining products Public lands, parks, recreation Social insurance, unemployment insurance, public assistance, workmen's compensation Transportation, highways, streets and roads Utilities, communications, televisions, radio, newspaper, power, CATV, gas Other (please specify)				
Item 6 N/A	bid or bid p		cision, procurement, contract ces or bond lobbyist was		CERTIFICATION: I hereby certificorrect statement in accordance with the statement of the st	•	•				